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Terms	Documents
((530/300)!.CCLS.) and ((antigen or allergen) near5 (non-atopic))	0

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allergen) near5 (non-atopic))[Clear](#)**Search History**

Today's Date: 7/15/2000

<u>DB Name</u>	<u>Query</u>	<u>Hit Count</u>	<u>Set Name</u>
USPT	((530/300)!.CCLS.) and ((antigen or allergen) near5 (non-atopic))	0	L9
USPT	((424/282.1)!.CCLS.) and ((antigen or allergen) near5 (non-atopic))	0	L8
USPT	((424/278.1)!.CCLS.) and ((antigen or allergen) near5 (non-atopic))	0	L7
USPT	((424/184.1)!.CCLS.) and ((antigen or allergen) near5 (non-atopic))	2	L6
USPT	(antigen or allergen) near5 (non-atopic)	5	L5
USPT	(antigen near5 non-atopic)	1	L4
USPT	(Der pII) near10 (vaccine)	15	L3
USPT	11 and ((bone adj protein) near10 (matrix or sponge))	2	L2
USPT	(bone adj protein) near10 cartilage	36	L1

(FILE 'HOME' ENTERED AT 17:16:35 ON 15 JUL 2000)

FILE 'MEDLINE, BIOSIS, CAPLUS' ENTERED AT 17:17:06 ON 15 JUL 2000

L1	0 S (DERPII) AND (IMMUNI? OR VACCIN?)
L2	17 S (DER PII)
L3	16 S L2 AND (IMMUN? OR VACCIN?)
L4	0 S L3 AND (TETANUS TOXOID)
L5	10 DUPLICATE REMOVE L3 (6 DUPLICATES REMOVED)
L6	0 S (SAINT-REMY, JEAN-MARIE)
L7	0 S (JEAN-MARIE SAINT-REMY)
L8	1 S (SART-BERNARD)
L9	422 S (ANTIGEN (5W) ATOPIC)
L10	14 S ((ANTIGEN (5W) NON-ATOPIC)) AND (IMMUN? OR VACCIN?)
L11	10 DUPLICATE REMOVE L10 (4 DUPLICATES REMOVED)

L6 ANSWER 2 OF 2 CAPLUS COPYRIGHT 2000 ACS
AN 1993:668892 CAPLUS
DN 119:268892
TI In vivo **clonal dominance** and limited T-cell receptor
usage in human CD4+ T-cell recognition of house dust mite allergens
AU Wedderburn, Lucy R.; O'Hehir, Robyn E.; Hewitt, Colin R. A.; Lamb,
Jonathan R.; Owen, Michael J.
CS Imp. Cancer Res. Fund, London, WC2A 3PX, UK
SO Proc. Natl. Acad. Sci. U. S. A. (1993), 90(17), 8214-18
CODEN: PNASA6; ISSN: 0027-8424
DT Journal
LA English

=> d ab

L6 ANSWER 1 OF 2 BIOSIS COPYRIGHT 2000 BIOSIS
AB Sensitivity to house dust mite antigens in atopic individuals is a major
cause of allergic diseases, ranging from asthma to rhinitis and
dermatitis. We have studied the T-cell receptor (TCR) usage of
house-dust-mite-specific CD4+ T-cell clones isolated from an atopic
individual, by using the anchored polymerase chain reaction, and have
analyzed the peripheral TCR repertoire of the same individual. Several
T-cell clones had identical TCRs at the sequence level, despite the fact
that they had been independently isolated, in some cases, in different
years. These data suggest the presence in vivo of long-lived T-cell
clones. We have also shown that junctional sequences identical to these
clones are present in peripheral blood T cells taken 6 years after the
isolation of the T-cell clones. The analysis of TCR genes used by the
panel of clones reveals oligoclonality, with the variable (V) region gene
segments V-alpha-8 and V-beta-3 being dominant, although there is minimal
conservation of junctional sequences. The results have implications for
understanding the TCR recognition of an environmental aeroallergen and

the
life span of T-cell clones in vivo during a chronic immune response.

L8 ANSWER 9 OF 13 MEDLINE

AB In a prospective study, 60 patients with allergic rhinoconjunctivitis and/or asthma due to house dust mites were chosen for hyposensitization treatment with Migen (M) or Pharmalgen (P). Immunotherapy stretched over

a

whole year and every 3 months clinical results were evaluated by the patient's symptom score, by results of skin prick and conjunctival provocation tests, as well as by RIA and ELISA regarding the total and specific IgE and also specific IgG and IgG4 levels. Out of 30 patients of the M group, 15 were followed up over the whole therapeutic regimen, 4 of whom showed a very good, 7 a good to moderate clinical outcome and 4 showed no improvement at all. In the P group, 17 out of 30 patients were followed up whereby 9 showed a very good and 8 a good to moderate response. In both groups of patients a statistically significant decrease in skin and conjunctival sensitivity to mite allergens was observed after 12 months of therapy. However, there was no correlation between this observation and the **failure** or success of immunotherapy. Furthermore, in both groups there was significant increase in total and specific IgE (with a slight decrease after 6 to 12 months) and also in specific IgG and IgG4 (especially in the P group), but again these

changes

in antibody levels gave no indication of a good or bad clinical outcome. Hence, we believe other reasons than the usually presented thesis of inducing "blocking antibodies" by immunotherapy to be responsible for the well-known effects of hyposensitization.

=> d 9 bib

L8 ANSWER 9 OF 13 MEDLINE

AN 89370595 MEDLINE

DN 89370595

TI [Comparative studies of the effectiveness of specific immunotherapy in house dust mite **allergy**].

Vergleichende Untersuchungen zur Wirksamkeit einer spezifischen Immuntherapie bei Hausstaubmilben-Allergie.

AU Ebner H; Neuchrist C; Havelec L; Kraft D

CS Ambulatorium fur Allergie und klinische Immunologie, Wien..

SO WIENER KLINISCHE WOCHENSCHRIFT, (1989 Aug 4) 101 (15) 504-11.
Journal code: XOP. ISSN: 0043-5325.

CY Austria

DT (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LA German

FS Priority Journals

EM 198912